

Please type a plus sign (+) inside this box → ☒

PTO/SB/05 (4/96)  
Approved for use through 09/30/2000 OMB 0651-0032  
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. \_\_\_\_\_  
First Inventor or Application Identifier Michel Laberge  
Title Optical cross connect switch having improved alignment control system  
Express Mail Label No. \_\_\_\_\_

**APPLICATION ELEMENTS**  
See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ \* Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Specification [Total Pages **116**]  
(preferred arrangement set forth below)
- Descriptive title of the invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the invention
  - Brief Summary of the invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **21**]
4. Oath or Declaration [Total Pages **4**]
- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 16 completed)
- i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

5. ☐ Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

7. ☒ Assignment Papers (cover sheet & document(s))
8. ☒ 37 C.F.R. § 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
9. ☐ English Translation Document (if applicable)
10. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
13. ☐ \* Small Entity Statement(s) ☐ Statement filed in prior application, Status still proper and desired (PTO/SB/09-12)
14. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
15. ☐ Other: \_\_\_\_\_

\* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_\_  
Prior application information Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☒ Correspondence address below

Name Dan Gelbart

Address Creo Products Inc.  
3700 Gilmore Way

City Burnaby State BC Zip Code V5G 4M1

Country CANADA Telephone (604) 451-2709 Fax (604) 451-2711

Name (Print/Type) Dan Gelbart Registration No. (Attorney/Agent) \_\_\_\_\_  
Signature \_\_\_\_\_ Date April 24/2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

# FEE TRANSMITTAL

## for FY 1999

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ ) 4,404.00

### Complete if Known

Application Number  
Filing Date  
First Named Inventor Michel Laberge  
Examiner Name  
Group / Art Unit  
Attorney Docket No.

### METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 03-3571

Deposit Account Name Dan Gelbart

- ☒ Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:  
☐ Check ☐ Money Order ☐ Other

### FEE CALCULATION

#### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	760	201	380			Utility filing fee	710
106	310	206	155			Design filing fee	
107	480	207	240			Plant filing fee	
108	760	208	380			Reissue filing fee	
114	150	214	75			Provisional filing fee	
SUBTOTAL (1) (\$ )							710.00

#### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
83	-20** = 63	X 18 =	1,134
Independent Claims	35	- 3** = 32	X 80 = 2,560
Multiple Dependent			0

\*\*or number previously paid, if greater; For Reissues, see below

#### Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim, if not paid
109	78	209	39	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ ) 3,694

### FEE CALCULATION (continued)

#### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65			Surcharge - late filing fee or oath	
127	50	227	25			Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130			Non-English specification	
147	2,520	147	2,520			For filing a request for reexamination	
112	920*	112	920*			Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*			Requesting publication of SIR after Examiner action	
115	110	215	55			Extension for reply within first month	
116	380	216	190			Extension for reply within second month	
117	870	217	435			Extension for reply within third month	
118	1,360	218	680			Extension for reply within fourth month	
128	1,850	228	925			Extension for reply within fifth month	
119	300	219	150			Notice of Appeal	
120	300	220	150			Filing a brief in support of an appeal	
121	260	221	130			Request for oral hearing	
138	1,510	138	1,510			Petition to institute a public use proceeding	
140	110	240	55			Petition to revive - unavoidable	
141	1,210	241	605			Petition to revive - unintentional	
142	1,210	242	605			Utility issue fee (or reissue)	
143	430	243	215			Design issue fee	
144	580	244	290			Plant issue fee	
122	130	122	130			Petitions to the Commissioner	
123	50	123	50			Petitions related to provisional applications	
126	240	126	240			Submission of Information Disclosure Stmt	
581	40	581	40			Recording each patent assignment per property (times number of properties)	
146	760	246	380			Filing a submission after final rejection (37 CFR § 1.129(a))	
149	760	249	380			For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____							
Other fee (specify) _____							
* Reduced by Basic Filing Fee Paid							
SUBTOTAL (3) (\$ )							0

### SUBMITTED BY

Name (Print/Type) Dan Gelbart Registration No. (Attorney/Agent) Complete (if applicable)  
Telephone 609 451 2709  
Signature Date April 24/2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.